

Page 1 Of 2

Date Completed: _____ Failure Code: _____

Completed By : _____ Signature : _____

Accepted By : _____ Signature : _____

Delays

Emp No	Date	Hours	Code/Hrs
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1 1

YOU ARE RESPONSIBLE FOR YOUR OWN SAFETY AND MUST ENSURE THAT THE REQUIRED PPE IS WORN FOR EVERY JOB YOU ARE DOING. IF YOU HAVE ANY QUESTIONS CONCERNING THE WORK RULES, SAFETY CODES, OR REQUIRED PPE, PLEASE CONTACT YOUR SUPERVISOR.



02-60456-70 A

IP7_037478

** Work Order Parts List **							
Part No	Description	PO/Req/SIR	Date Due	U/M	Reqd	Commit	Issued/Rcvd
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1 DIRECT	9TH FLOOR PLATFORM EXTENSION FOR INSTRUMENT CABINET; EXTENSI	04-45576-1	02/23/04	EA	1	0	1
2 DIRECT	SERVICE CONTRACT PAY AUTHORIZATION FOR BPI/TEI FOR T&M WORK,	05-45576-1	11/29/04	EA	1	0	1